



<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b>		Docket No. (Optional) N9450.0020/P020										
<div style="display: flex; justify-content: space-between;"><div style="width: 60%;">In re Application of     Soshiro Kuzunuki et al.</div><div style="width: 40%; text-align: right;">Filed June 13, 2001</div></div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"><div style="width: 60%;">Application Number 09/879,164-Conf. #3656</div><div style="width: 40%; text-align: right;">June 13, 2001</div></div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"><div style="width: 60%;">For:     MULTIMEDIA INFORMATION DELIVERY SYSTEM AND MOBILE INFORMATION TERMINAL DEVICE</div><div style="width: 40%;"></div></div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"><div style="width: 40%;">Art Unit     2863</div><div style="width: 60%;">Examiner     S. J. Cherry</div></div>												
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and appropriate non-small-entity fee are as follows (check time period desired):</p> <table style="width: 100%; border: none;"><tr><td style="width: 60%;"><input type="checkbox"/> One month (37 CFR 1.17(a)(1))</td><td style="width: 40%; text-align: right;">\$ _____</td></tr><tr><td><input type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td><td style="text-align: right;">\$ _____</td></tr><tr><td><input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td><td style="text-align: right;">\$     950.00</td></tr><tr><td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))</td><td style="text-align: right;">\$ _____</td></tr><tr><td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5))</td><td style="text-align: right;">\$ _____</td></tr></table> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____ .</p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input checked="" type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number     04-1073     .</p> <p>I have enclosed a duplicate copy of this sheet.</p> <p>I am the     <input type="checkbox"/> applicant/inventor.</p> <p>                 <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71.    Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).</p> <p>                 <input type="checkbox"/> attorney or agent of record. Registration Number     _____</p> <p>                 <input checked="" type="checkbox"/> attorney or agent under 37 CFR 1.34(a).    Registration number if acting under 37 CFR 1.34(a)     50,515</p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"><div style="width: 45%; text-align: center;"><p>_____ Date</p><p>_____ (202) 775-4742 Telephone Number</p></div><div style="width: 45%; text-align: center;"><p>_____ Signature</p><p>_____ Gabriela Coman Typed or printed name</p></div></div> <p style="font-size: small; margin-top: 10px;">NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below</p>			<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$ _____	<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$ _____	<input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$     950.00	<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$ _____	<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$ _____
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<div style="display: flex; align-items: center;"><input type="checkbox"/> Total of     1     forms are submitted.</div>												

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